

Oral Surgery

1- Migraine is classified as orofacial pain

- A) Typical
- B) Psychogenic
- C) Neurogenic
- D) vascular

2- Vasoactive ergotamine is used in treating.....

- A) Cluster headache
- B) Ramsay Hunt syndrome
- C) Osteoarthritis
- D) Trigeminal neuralgia

3- Acyclovir is used in treating.....

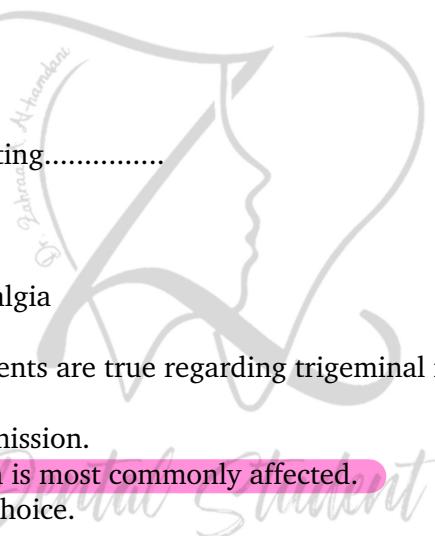
- A) Herpes Zoster
- B) Migraine
- C) Giant cell arteritis
- D) Glossopharyngeal neuralgia

4- All the following statements are true regarding trigeminal neuralgia except.....

- A) Exact cause is unclear.
- B) There are periods of remission.
- C) The ophthalmic division is most commonly affected.
- D) Tegretol is the drug of choice.

5- The presence of trigger zone is a characteristic feature of

- A) Post herpetic neuralgia
- B) Ramsay Hunt syndrome
- C) Atypical facial pain
- D) Trigeminal neuralgia



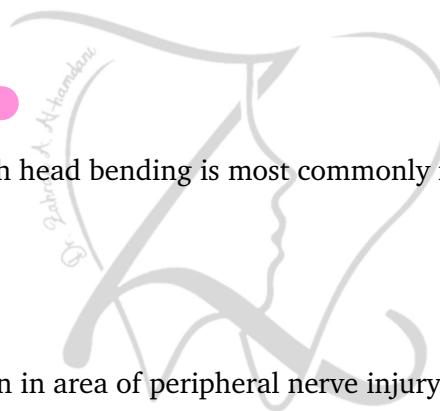
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6- The presence of skin growth behind the ear drum occurs in

- A) Cholesteatoma
- B) Cluster headache
- C) Giant cell arteritis
- D) Migraine

7- The artery is most commonly affected by giant cell arteritis

- A) Deep temporal
- B) Maxillary
- C) Lingual
- D) Superficial temporal



8- Pain that increase with head bending is most commonly related to.....

- A) Maxillary sinusitis
- B) Giant cell arteritis
- C) Trigeminal neuralgia
- D) Causalgia

9- Localized burning pain in area of peripheral nerve injury occurs in the case of

- A) Frey's syndrome
- B) Causalgia
- C) TMJ myofascial pain dysfunction syndrome
- D) Post herpetic neuralgia

10- Herpes zoster that involves the facial nerve is also known as

- A) Frey's syndrome
- B) Sialadenitis
- C) Ramsay hunt syndrome
- D) Post herpetic neuralgia

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11- Initially relieved by clenching the teeth, but later on is aggravated by this action.

- A) Dental pain
- B) Mucosal pain
- C) Atypical odontalgia
- D) Periodontal pain

12- Serum uric acid is elevated in

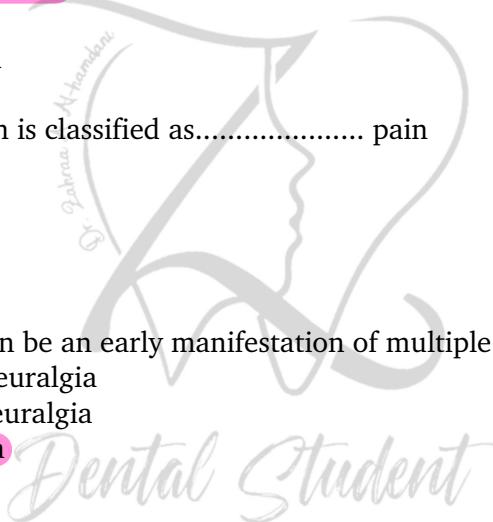
- A) Traumatic arthritis of the TMJ
- B) Osteoarthritis of the TMJ
- C) Giant cell arteritis
- D) Facial arthromyalgia

13- Factitious ulceration is classified as..... pain

- A) Typical mucosal
- B) Vascular
- C) Neuralgic
- D) Psychogenic

14- can be an early manifestation of multiple sclerosis

- A) Two mental nerve neuralgia
- B) Glossopharyngeal neuralgia
- C) Trigeminal neuralgia
- D) Migraine



15- Severe pain of ischemic heart disease may refer to the teeth

- A) Left maxillary
- B) Right maxillary
- C) Left mandibular
- D) Right mandibular

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16. Chronic pain is of long duration that lasts for.....

- A) 2-4 months
- B) 3-5 months
- C) 4-6 months
- D) 5-7 months
- E) 7-8 months

17. Acute pain is

- A) Short duration
- B) Moderate to sever
- C) May not be relieved by mild analgesics
- D) Usually not associated with depression
- E) All of the above

18. It is essential to take the patient history in diagnosing orofacial pain in order to.....

- A) identify the specific cause of the pain
- B) prescribe the appropriate medication
- C) determine the severity of pain
- D) Distinguish between organic and psychogenic origin of pain
- E) refer the patient for further investigation

19. Factors that should be included in the patient's history for diagnosing orofacial pain include

- A) Diet, exercise, sleep patterns
- B) Medication history, allergies, surgeries
- C) Character of pain, severity of the pain, site of the pain, provoking and relieving factors, associated clinical features, emotional history and general medical history
- D) Age, gender and occupation
- E) Social status, educational level, income

20. What is Allodynia?

- A) Pain caused by psychological trauma
- B) Pain caused by a specific disease
- C) Pain caused by a stimulus that does not normally provoke pain.
- D) Pain caused by a genetic mutation
- E) Pain caused by a physical injury

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21. What is Analgesia?

- A. Absence of pain in response to stimulation that would normally be painful.
- B. Absence of all sensation.
- C. Unpleasant abnormal sensation
- D. Diminished sensitivity to noxious stimulation.
- E. Diminished sensitivity to all stimulation.

22. What is Anesthesia:

- A. Absence of pain in response to stimulation that would normally be painful.
- B. Absence of all sensation.
- C. Unpleasant abnormal sensation
- D. Diminished sensitivity to noxious stimulation.
- E. Diminished sensitivity to all stimulation.

23. What is Dysesthesia?

- A. Absence of pain in response to stimulation that would normally be painful.
- B. Absence of all sensation.
- C. Unpleasant abnormal sensation whether spontaneous or evoked
- D. Diminished sensitivity to noxious stimulation.
- E. Diminished sensitivity to all stimulation.

24. What is Paresthesia?

Abnormal sensation, whether spontaneous or evoked

Unpleasant abnormal sensation whether spontaneous or evoked

Diminished sensitivity to noxious stimulation.

Diminished sensitivity to all stimulation.

Absence of pain in response to stimulation that would normally be painful.

25. What is Hypoalgesia?

Absence of pain in response to stimulation that would normally be painful.

Absence of all sensation.

Unpleasant abnormal sensation

Diminished sensitivity to noxious stimulation.

Diminished sensitivity to all stimulation.

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26. What is Hypoesthesia?

- A. Absence of pain in response to stimulation that would normally be painful.
- B. Absence of all sensation.
- C. Unpleasant abnormal sensation whether spontaneous or evoked
- D. Diminished sensitivity to noxious stimulation.
- E. Diminished sensitivity to all stimulation.

27. What is Hyperalgesia?

- A. Diminished sensitivity to noxious stimulation.
- B. Increased sensitivity to noxious stimulation.
- C. Diminished sensitivity to all stimulation.
- D. Increased sensitivity to all stimulation.
- E. None of the above

28. What is hyperesthesia?

- Diminished sensitivity to noxious stimulation.
- Increased sensitivity to noxious stimulation.
- Diminished sensitivity to all stimulation.
- Increased sensitivity to all stimulation.
- None of the above

29. Examples of visceral orofacial pains include

- salivary gland pain
- pain caused by dental pulpitis
- periodontal pain
- tempromandibular pain
- A and B

30. Examples of musculoskeletal pains are ...

- salivary gland pain
- pain caused by dental pulpitis
- periodontal pain
- tempromandibular pain
- C and D

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31. Visceral and musculoskeletal pains are subtypepain

A. Neuropathic pain

B. Somatic pain

C. psychological.

D. A and B

E. B and C

32. Burning mouth syndrome is classified a..... orofacial pain

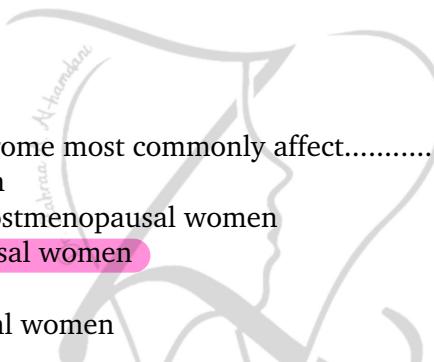
A. Typical

B. Psychogenic

C. Vascular

D. Neuropathic

E. None of the above



33. Burning mouth syndrome most commonly affect.....

A. Tongue, young women

B. Floor of the mouth, postmenopausal women

C. Tongue, postmenopausal women

D. Palate, young men

E. Palate, postmenopausal women

34.% of patients suffering from burning mouth syndrome improves without treatment over a 2-year period.

A. 20

B. 30

C. 40

D. 50

E. 60

35. Patient suffering fromusually feels burning or aching sensation in all part of the oral cavity especially the tongue accompanied by dry mouth and altered taste

A. Oral dysesthesia

B. Facial arthromyalgia

C. Paroxysmal trigeminal neuralgia

D. Causalgia

E. Burning mouth syndrome

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36. All of the following is true regarding burning mouth syndrome except.....

- A. Exact cause is unknown
- B. Hormonal replacement is does consistently improve symptoms.**
- C. Defect in pain modulation may be the most promising theory that explains it
- D. Treated by antidepressant medication
- E. Most patients are postmenopausal women

37. Which of the following is a characteristic of migraine headache?

- A. Unilateral location, pulsating quality, moderate to severe pain.**
- B. An aura - a neurologic disturbance, frequently expressed as flashing or shimmering lights or a partial loss of vision -may develop several hours before headache onset.
- C. No associated symptoms
- D. Typically last for 2 hours
- E. More common in males

38. Which of the following is not a characteristic of migraine headache?

- A. Unilateral location, pulsating quality, moderate to severe pain.
- B. An aura - a neurologic disturbance, frequently expressed as flashing or shimmering lights or a partial loss of vision -may develop several minutes to 1 hours before headache onset in approximately 40% of patients.
- C. No associated symptoms**
- D. Typically last for 4-72 hours (if untreated)
- E. Women are at least twice as likely as men to have migraines.

39. All of the following is true regarding migraine except.....

- A. Complicated auras may produce transient hemiparesis, aphasia, or blindness.
- B. About 80% of those suffering from migraine headaches have nausea and photophobia (intolerance to light) during attacks.
- C. Migraine intensified by sneezing, light, smell and noise, certain vasoactive foods or drugs.
- D. The mechanism for migraine headache, although not completely understood, appears to involve neurogenic inflammation of intracranial blood vessels resulting from neurotransmitter imbalance in certain brainstem centres.
- E. Anticonvulsants and botulinum toxin are not used in treating migraine**

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40. To be defined as chronic tensiontype headache, symptoms must be present longer than days per month.

- A. 5
- B. 10
- C. 15
- D. 20
- E. 25

41. Tension type headache ispain occurs as a result of stressful life, anxiety, neurosis or depression.

- A. A musculoskeletal Somatic
- B. A visceral somatic
- C. Psychogenic
- D. Neurogenic
- E. None of the above

42. All of the following is true regarding tension type headache exce.....

- A. More common present in women than in men.
- B. The headache is generally bilateral, Pain is frequently bi-temporal or frontal temporal in distribution.
- C. Patients commonly describe their pain as though their head is "in a vice" or "squeezing hatband" is around their head.
- D. These headaches can occur with or without "pericranial muscle tenderness"
- E. It is considered a neurogenic pain

43. All of the following is correct regarding cluster headache except

- A. An intense sever or very sever unilateral head pain that last for 15-180 minutes - if untreated- typically centred around the eye(orbital and supraorbital) and temporal regions.
- B. Frequently described as a stabbing sensation (i.e., as if an ice pick was being driven into the eye).
- C. Some component of parasympathetic overactivity is present (commonly lacrimation, conjunctival injection, ptosis, or rhinorrhea).
- D .Attacks have a frequency from 1 every other day to 8 per day, commonly with precise regularity (eg., awakening the patient at the same time night after night).
- E. More common in females

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44. is also known as alarm clock headache
- A. Tension type headache
 - B. Migraine
 - C. Clusterheadache**
 - D. Giant cell arteritis
 - E. None of the above
45. is an inflammation of BV (vasculitis) of the cranial arterial tree that can affect any or all vessels of the aortic arch and its branches.
- A. Clusterheadache
 - B. Giant cell arteritis**
 - C. Tension type headache
 - D. Migraine
 - E. None of the above
46. Jaw claudication is a manifestation of
- A. Clusterheadache
 - B. Giant cell arteritis**
 - C. Tension type headache
 - D. Migraine
 - E. None of the above
47. Giant cell arteritis is characterised by.....
- A. Most prevalent in those over 50 years of age.
 - B. The inflammation of blood vessels results from a giant cell granulomatous reaction.
 - C. Dull aching or throbbing temporal or head pain is a common complaint affecting 70% of patients and is the presenting symptom in one-third of patients.
 - D. Jaw claudication (increasing weakness and pain in the jaw or tongue with ongoing mastication).
 - E. All of the above**

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48. Giant cell arteritis requires early treatment with high-dose corticosteroids, for many months, to avoid caused by extension of the disease process to the

- A. Blindness, ophthalmic nerve
- B. Blindness, optic nerve
- C. Blindness, ophthalmic artery
- D. Blindness, ophthalmic vein
- E. Deafness, vestibulocochlear nerve

49. Paroxysmal Trigeminal Neuralgia pain usually last for Followed by refractory period during which.....

- A. Seconds to one minute, pain can be reinitiated but needs higher stimulation
- B. 5 minutes, pain can't be reinitiated
- C. 10 minutes, pain can't be reinitiated
- D. 30 minutes, pain can be reinitiated but needs stronger stimulation
- E. Seconds to one minute, pain can't be reinitiated

50. Paroxysmal Trigeminal Neuralgia is characterised by all of the following except.....

- A. Unilateral location (96%); right > left.
- B. Common cutaneous trigger zones include the corner of the lips, cheek, ala of the nose, lateral brow, teeth, gingiva, or the tongue.
- C. The ophthalmic distribution of the trigeminal nerve is commonly affected.
- D. There is a period of remission but the condition tends to recur or persist throughout the patient's life.
- E. Absence of neurologic deficits and dentoalveolar cause of pain

51. The most common site of trigeminal neuralgia is the mandibular..... area and maxillaryarea.

- A. canine,posterior
- B. Mental, premolar
- C. Posterior, canine
- D. Canine, canine
- E. Mental, canine

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52. Trigeminal neuralgia is more common in.....

- A. Female patients younger than 50 years
- B. male patients older than 50 years
- C. Female patients older than 50 years**
- D. male patients younger than 50 years
- E. males and females are equally affected older than 50 years

53. all of the following can be used to treat trigeminal neuralgia except

- A. Peripheralneurectomy
- B. Cryotherapy
- C. Microvascular decompression of the offending vascular loop (Janett procedure).
- D. GammaKniferadiosurgery.
- E. Percutaneous needle thermal rhizotomy
- F. Dautrey procedure**

54. The following are some characteristic features of migraine except

- A. Recurrent unilateral throbbing pain
- B. Mostly affects men**
- C. Pain may be preceded by visual disturbance
- D. Pain may last 4-72 hours
- E. Light may increase the pain

55. Glossopharyngeal neuralgia is characterised by all of the following except.....

- A. The presenting symptom is typically sharp, electric shock like pain on swallowing
- B. trigger zone in the oropharynx or the base of the tongue.
- C. This pain is brought on by swallowing and radiate to the throat or tongue
- D. pain may be referred to the lower jaw.**
- E. pain may be referred to the upper jaw.**

56. . Two mental nerves neuralgia can be treated by

- A. Tegretol
- B. Relieving the inner surface of the denture over the mental area or by mental nerve transposition if the nerve becomes superficial following bone resorption.**
- C. Mental nerve decompression if the cause is mental foramen narrowing
- D. injection of 1 ml 60% or 90% alcohol into the mental foramen
- E. A and D

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57. The majority of patients who report to the physician with a chief complaint of headache are diagnosed with ...

... headache.

A. Migraine

B. Tension type

C. Cluster

D. Hypertension

E. None of the above

58. Alcohol ingestion and tobacco smoking consistently triggers.....headache

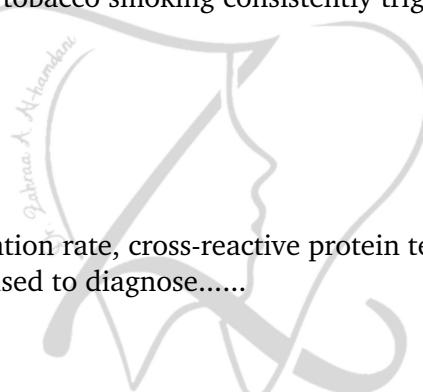
A. Migraine

B. Tension type

C. Sinus

D. Cluster

E. None of the above



Dental Student

59. Erythrocyte sedimentation rate, cross-reactive protein testing and biopsy of the artery are investigations used to diagnose.....

A. Cluster headache

B. Giant cell arteritis

C. Tension type headache

D. Migraine

E. None of the above

60. Mild superficial stimulation provokes trigeminal neuralgia pain. Local anesthesia of trigger zone temporarily arrests pain.

A. The first statement is true, the second statement is false

B. The first statement is false , the second statement is true

C. Both statements are true

D. Both statements are false

E. males and females are equally affected older than 50 years